MURRAY CITY MISCELLANEOUS PLAN SUBMITTAL REQUIREMENTS

	Permit Application No
Name of Applicant	Disarra Ma
Building Address	Phone No
following information has bee you, sign the bottom of the fo is included. Submit this form for Building Department revie	review, please check your plans and application to be sure the en included. When each of the following items has been checked by orm and have the Permit Specialist verify that all needed information with your application, plan review deposit, and two (2) sets of plansew. NOTE: APPLICATIONS FOR BUILDING PERMITS CANNOT REVIEW UNTIL THE SUBMITTAL IS COMPLETE.
*COM MUNITY DEVELOPME Approval signature fro	ENT APPROVAL om Planning and Zoning
*PLAN REVIEW DEPOSIT Plan review deposit of	f \$40.00 (will be credited toward total permit fee)
Contractor's name, ph general, electrical, plu license Type of improvement/ Estimate of valuation	one number, and address none number, address, and contractor's state license number for nmbing, and mechanical contractors as apply to job - attach copy of
and sidewalks Sign dimensions inclu *Stamped, signed, and	
*BUFFER WALLS Site plan Wall height, material,	reinforcement, and footing
Complete framing deta	out for trussed system; or ails acing, and blocking

	Grade and species of Size and material of a Roof sheathing Roofing material Attic access Attic ventilation	lumber II new beams, headers, and columns	
*PATIO	carport, and distances from p Dimensioned plan Footings size and depth Framing details with grade ar Rafter size, spacing, ar Joist size, spacing, ar Size and material of a Roof sheathing and roofing m Stair and guardrail details (fo	ructures on property, location and size property lines and other structures to and species of lumber and spans and spans with decking material II beams, headers, and columns naterial	
	Dimensions of pool Details of reinforcement Electrical plan Indication of 6-foot fence with Energy conservation requirer Pool heater shall have Heated pools shall ha Time clock is required	ments indicated e On-Off switch ve cover provided	
		luded. I understand that failure to the processing of my permit.	provide any needed
		Applicant's Signature	Date
		* Building Inspection Division Acceptance	Date

IF YOU NEED ASSISTANCE FROM A BUILDING INSPECTOR, PLEASE MAKE AN APPOINTMENT SO WE CAN SPEND SOME TIME WITH YOU TO ANSWER GENERAL QUESTIONS.